

ACCESS AUTHORIZATION

I, _____
First Name Middle Initial Last Name

am the (please check one):

☐ owner

☐ tenant

☒ authorized representative of the owner

of the property with the following address:

Address

244 FAE

City

Champion

State

MI

Zip Code

49814

(hereinafter "Property"), and as such I have the authority to sign this authorization.

I grant authorization to the United States Environmental Protection Agency (EPA), its officers, employees, contractors and other authorized representatives to enter the Property. The Property is currently owned by

First Name

Joseph D

Middle Initial

Deracha

Last Name

This authorization allows EPA, its officers, employees, contractors and other authorized representatives to have access to the Property to conduct sampling and other related response activities. EPA's activities at the Property will include, but not be limited to, the following:

collecting well water sample

The consent for access and use granted herein will commence on October 2011 and will continue until EPA completes the potable well sampling activities.

These actions by EPA are undertaken pursuant to its response authority under Section 104(a) of the Comprehensive Environmental Response, Compensation and Liability Act (CERCLA or Superfund), 42 U.S.C. Section 9604(a).

This written permission is given by me voluntarily, on behalf of myself and all other co-owners of this property, with knowledge of my right to refuse and without threats or promises of any kind.

(Please check one):

☒ I grant access to my properties.

☐ I do not grant access to my properties

(Signature)

(Printed Name)

(Title, if signing as authorized representative of owner)

(Date)

(Daytime Phone Number)

(Mailing address including City, State, and Zip Code)

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR KNOWLEDGE

Property Owner Name (if different from above):

First Name

Middle Initial

Last Name

Owner Mailing Address (if different than the physical address of the Property):

Address

City

State

Zip Code

Do you currently live in the Property? (circle one) **Y / N**

If not, is anyone living at the Property? (circle one) **Y / N**

Property Owner Telephone Number (if different from access authorization): _____

If Owner is not living at the Property, please provide the following information regarding residents at the property:

Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages: _____

Do you have an e-mail address? Please indicate here: _____

Is this house also connected to a municipal water supply line? (circle one) **Y / N** *N/A*

Does the residence share the well with another residence (s)? (circle one) **Y / N**

If yes, provide the physical address of all residences:

Address1

Address2

Do you want to be present during sampling? (circle one) **YES**

Y / N

Has your well been sampled in the past by the County, State, or EPA? If yes, when? yes 3
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: _____
Total Depth of Well: _____
Date Drilled: _____
Name of Drilling Company: _____
Casing Depth: _____
Casing Material: _____
Gallons Per Minute: _____
Static Water level: _____
Spigot at the wellhead? _____

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:

Please circle one or more as applicable:

Is the well water used for (a) drinking
(b) irrigation and/or gardening
(c) live stock
(d) other: _____

Please provide any additional comments you may have in the space below:

Please submit completed form to: US EPA
Attention:
Nuria Muñiz
USEPA REGION 5
77 West Jackson Boulevard
Mail Code: SR-6J
Chicago, IL 60604-3507

ACCESS AUTHORIZATION

I, _____

First Name

Middle Initial

Last Name

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☒ owner

☐ tenant

☐ authorized representative of the owner

of the property with the following address:

Address _____

City

CHAMPION

State

Zip Code

4998 49814

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I grant authorization to the United States Environmental Protection Agency (EPA), its officers, employees, contractors and other authorized representatives to enter the Property. The Property is currently owned by

ABOVE

First Name

Middle Initial

Last Name

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(Please check one):

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☐ I do not grant access to my properties

(Signature) _____

(Date) *10-26-11*

(Printed Name) _____

(Daytime Phone Number) _____

(Title, if signing as authorized representative of owner)

(Mailing address including City, State, and Zip Code)

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR KNOWLEDGE

Property Owner Name (if different from above):

ABOVE

First Name

Middle Initial

Last Name

Owner Mailing Address (if different than the physical address of the Property):

Address

City

State

Zip Code

Do you currently live in the Property? (circle one) *Y* / N

If not, is anyone living at the Property? (circle one) Y / *N*

Property Owner Telephone Number (if different from access authorization):

1 phone no. Ex. 6

If Owner is not living at the Property, please provide the following information regarding residents at the property:

Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages: _____

Do you have an e-mail address? Please indicate here: *N/A*

Is this house also connected to a municipal water supply line? (circle one) Y / *N*

Does the residence share the well with another residence (s)? (circle one) Y / *N*

If yes, provide the physical address of all residences:

Address1

Address2

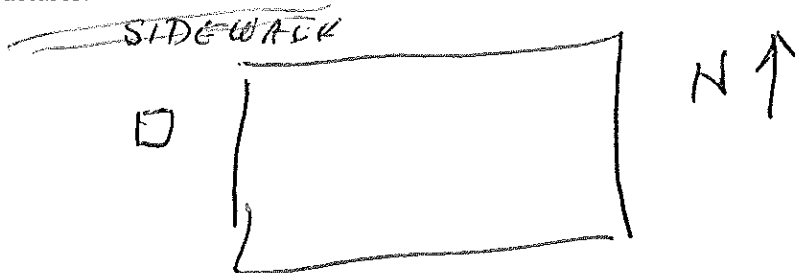
Do you want to be present during sampling? (circle one)

Y / N

Has your well been sampled in the past by the County, State, or EPA? If yes, when? _____
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: Y
Total Depth of Well: 26 FT
Date Drilled: 1991
Name of Drilling Company: SELF
Casing Depth: 8
Casing Material: PLASTIC
Gallons Per Minute: _____
Static Water level: 13 FT
Spigot at the wellhead? Y

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Please circle one or more as applicable:

Is the well water used for ☒ (a) drinking
☒ (b) irrigation and/or gardening
☐ (c) live stock
(d) other: WASHING ETC

Please provide any additional comments you may have in the space below:

Please submit completed form to: US EPA
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77 West Jackson Boulevard
Mail Code: SR-6J
Chicago, IL 60604-3507

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Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages: _____

Do you have an e-mail address? Please indicate here: _____ N/A

Is this house also connected to a municipal water supply line? (circle one) Y / N

Does the residence share the well with another residence (s)? (circle one) Y / N

If yes, provide the physical address of all residences:

Address1

Address2

Do you want to be present during sampling? (circle one)

Y / N

October 14, 2011

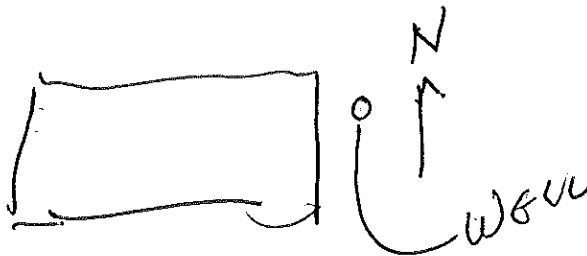
Page 2 of 3

NOT NECESSARY
UNLESS OWNERS HELP
IS NEEDED

Has your well been sampled in the past by the County, State, or EPA? If yes, when? _____
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: Y
Total Depth of Well: 45-60 FT
Date Drilled: 1988 A. 8007
Name of Drilling Company: KELGON IRON MT
Casing Depth: _____
Casing Material: _____
Gallons Per Minute: _____
Static Water level: _____
Spigot at the wellhead? _____ OUTDOOR TAP NEAR WELL

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Please circle one or more as applicable:

Is the well water used for ☒ (a) drinking
☒ (b) irrigation and/or gardening
☐ (c) live stock
(d) other: BATHING/TOILET/CLEANING

Please provide any additional comments you may have in the space below:

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Chicago, IL 60604-3507

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(Date)

(Printed Name)

(Daytime Phone Number)

(Title, if signing as authorized representative of owner)

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State

Zip Code

Do you currently live in the Property? (circle one) Y N

If not, is anyone living at the Property? (circle one) Y / N

Property Owner Telephone Number (if different from access authorization): _____

1 phone no. Ex. 6

If Owner is not living at the Property, please provide the following information regarding residents at the property:

Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages: 2

Do you have an e-mail address? Please indicate here: _____

1 email address Ex. 6

Is this house also connected to a municipal water supply line? (circle one) Y / N

Does the residence share the well with another residence (s)? (circle one) Y / N

If yes, provide the physical address of all residences:

Address1

Address2

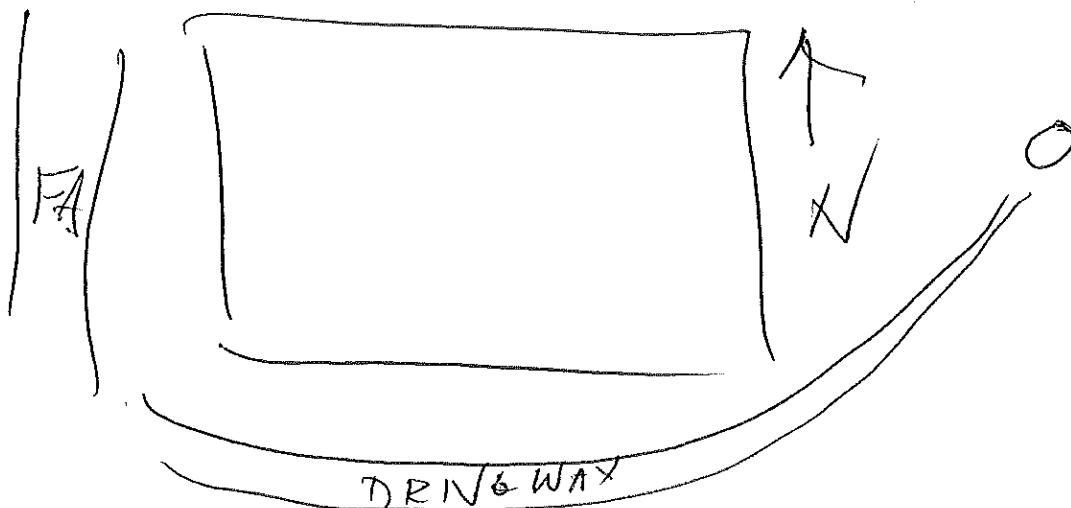
Do you want to be present during sampling? (circle one)

Y / N

Has your well been sampled in the past by the County, State, or EPA? If yes, when? No
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: Y
Total Depth of Well: 60
Date Drilled: 1989
Name of Drilling Company: _____
Casing Depth: _____
Casing Material: STEEL
Gallons Per Minute: _____
Static Water level: _____
Spigot at the wellhead? _____

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Please circle one or more as applicable:

Is the well water used for ☒ (a) drinking
(b) irrigation and/or gardening
(c) live stock
(d) other: _____

Please provide any additional comments you may have in the space below:

Please submit completed form to: US EPA
Attention:
Nuria Muñiz
USEPA REGION 5
77 West Jackson Boulevard
Mail Code: SR-6J
Chicago, IL 60604-3507

ACCESS AUTHORIZATION

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First Name

Middle Initial

Last Name

am the (please check one):

☒ owner

☐ tenant

☐ authorized representative of the owner

of the property with the following address:

Address

City

C H A M P I O N

State

M I

Zip Code

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(Date)

(Printed Name)

(Daytime Phone Number)

(Title, if signing as authorized representative of owner)

(Mailing address including City, State, and Zip Code)

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Property Owner Name (if different from above):

First Name

Middle Initial

Last Name

Owner Mailing Address (if different than the physical address of the Property):

Address

City

State

Zip Code

Do you currently live in the Property? (circle one) Y / N

If not, is anyone living at the Property? (circle one) Y / N

Property Owner Telephone Number (if different from access authorization): _____

If Owner is not living at the Property, please provide the following information regarding residents at the property:

Name: _____

Phone: _____

Other contact information: _____ *1 name and phon no. Ex. 6*

Number of residents and ages: _____ / _____

Do you have an e-mail address? Please indicate here: _____

Is this house also connected to a municipal water supply line? (circle one) Y / N

Does the residence share the well with another residence (s)? (circle one) Y / N

If yes, provide the physical address of all residences:

Address1

Address2

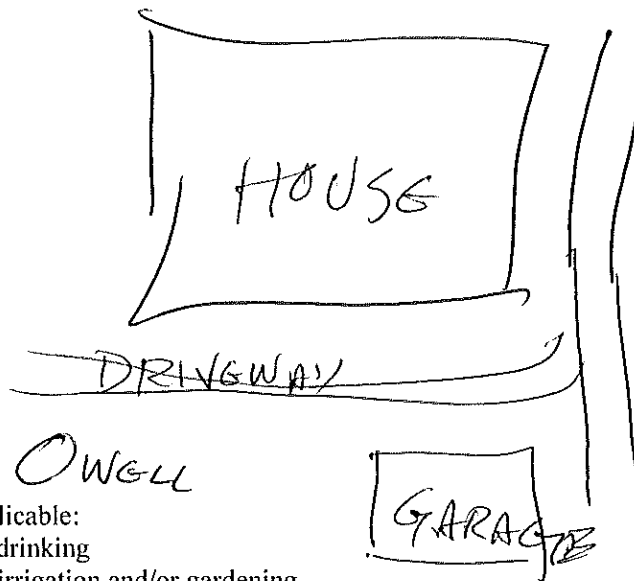
Do you want to be present during sampling? (circle one)

Y / N

Has your well been sampled in the past by the County, State, or EPA? If yes, when? _____
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: Y
Total Depth of Well: _____
Date Drilled: _____
Name of Drilling Company: _____
Casing Depth: _____
Casing Material: _____
Gallons Per Minute: _____
Static Water level: _____
Spigot at the wellhead? _____

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Please circle one or more as applicable:

Is the well water used for ☒ (a) drinking
(b) irrigation and/or gardening
(c) live stock
(d) other: _____

Please provide any additional comments you may have in the space below:

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USEPA REGION 5
77 West Jackson Boulevard
Mail Code: SR-6J
Chicago, IL 60604-3507

10/25/11

3 RESIDENTS

HAS 2 WELLS
ON PROPERTY

USING SAME WELL

ACCESS AUTHORIZATION

I, [REDACTED]

First Name

Middle Initial

Last Name

am the (please check one):

☒ owner

☐ tenant

☐ authorized representative of the owner

of the property with the following address:

Address [REDACTED]

City

CHAMPION

State

Zip Code

49814

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First Name [REDACTED]

Middle Initial

Last Name [REDACTED]

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(Please check one): ☒ I grant access to my properties. ☐ I do not grant access to my properties

[REDACTED]
(Signature)

10/25/11
(Date)

[REDACTED]
(Printed Name)

(Daytime Phone Number)

(Title, if signing as authorized representative of owner)

(Mailing address including City, State, and Zip Code)

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR KNOWLEDGE

Property Owner Name (if different from above):

First Name

Middle Initial

Last Name

Owner Mailing Address (if different than the physical address of the Property):

Address

City

State

Zip Code

Do you currently live in the Property? (circle one) ☒ N

If not, is anyone living at the Property? (circle one) Y / ☒

Property Owner Telephone Number (if different from access authorization):

1 phone no. Ex. 6

If Owner is not living at the Property, please provide the following information regarding residents at the property:

Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages: _____

Do you have an e-mail address? Please indicate here: N/A

Is this house also connected to a municipal water supply line? (circle one) ☒ N

Does the residence share the well with another residence (s)? (circle one) ☒ N

SEE BOB H

If yes, provide the physical address of all residences:

Address1

2 addresses Ex. 6

Address2

Do you want to be present during sampling? (circle one)

☒ Y ☒

Has your well been sampled in the past by the County, State, or EPA? If yes, when? No
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: Y
Total Depth of Well: 8-10 FT
Date Drilled: 1982
Name of Drilling Company: SELF
Casing Depth: FULL
Casing Material: CLAY-PIPE CONCRETE
Gallons Per Minute: _____
Static Water level: 6
Spigot at the wellhead? Y

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:

Please circle one or more as applicable:

Is the well water used for (a) drinking
(b) irrigation and/or gardening
(c) live stock
(d) other: _____

Please provide any additional comments you may have in the space below:

Please submit completed form to: US EPA
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ACCESS AUTHORIZATION

I, [REDACTED]

First Name

Middle Initial

Last Name [REDACTED]

am the (please check one):

☒ owner

☐ tenant

☐ authorized representative of the owner

of the property with the following address:

Address [REDACTED]

City

CHAMPION

State

Zip Code

4981K

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[REDACTED]

10-25-11
(Date)

[REDACTED]

(Printed Name)

(Daytime Phone Number)

(Title, if signing as authorized representative of owner)

5 names or addresses Ex. 6

(Mailing address including City, State, and Zip Code)

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Property Owner Name (if different from above):

2 names Ex. 6

First Name

Middle Initial

Last Name

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Address

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Do you currently live in the Property? (circle one) ☒ Y / ☐ N

If not, is anyone living at the Property? (circle one) ☒ Y / ☐ N

Property Owner Telephone Number (if different from access authorization):

1 phone no. Ex. 6

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Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages:

resident no. info Ex. 6

Do you have an e-mail address? Please indicate here: _____

Is this house also connected to a municipal water supply line? (circle one)

☒ Y / ☐ N

Does the residence share the well with another residence (s)? (circle one)

☒ Y / ☐ N

If yes, provide the physical address of all residences:

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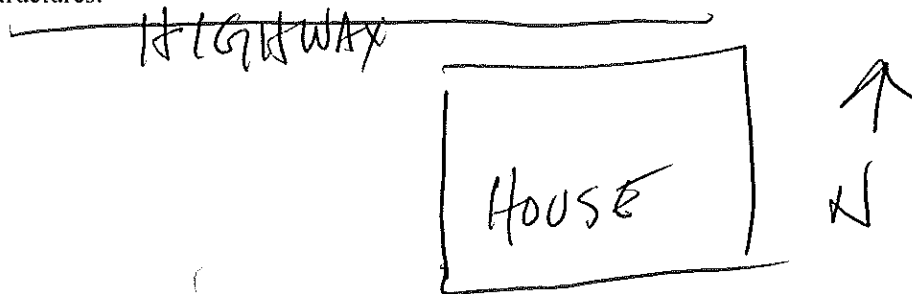
Do you want to be present during sampling? (circle one)

☒ Y / ☐ N

Has your well been sampled in the past by the County, State, or EPA? If yes, when? ✓
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: ✓
Total Depth of Well: _____
Date Drilled: 1920s
Name of Drilling Company: _____
Casing Depth: _____
Casing Material: ROCK
Gallons Per Minute: _____
Static Water level: _____
Spigot at the wellhead? No

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Well 450 feet

Please circle one or more as applicable:

- Is the well water used for ☒ (a) drinking
☒ (b) irrigation and/or gardening
(c) live stock
(d) other: _____

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Do you have an e-mail address? Please indicate here: _____ *email address Ex. 6*

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Address1

Address2

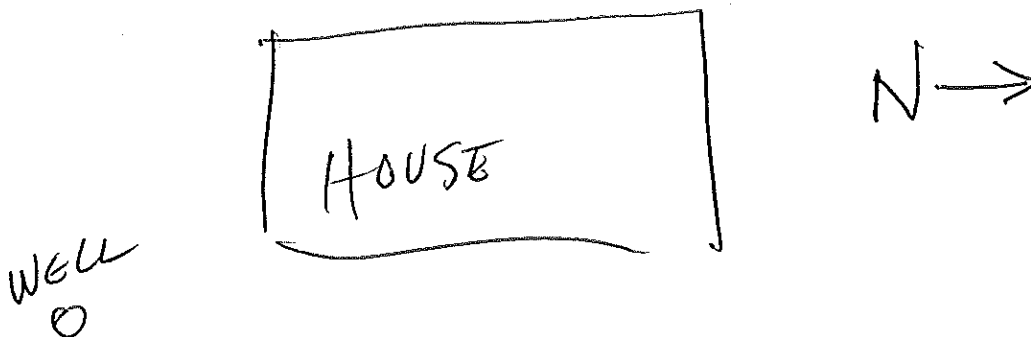
Do you want to be present during sampling? (circle one)

Y / N

Has your well been sampled in the past by the County, State, or EPA? If yes, when? _____
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: Y
Total Depth of Well: 68 FT
Date Drilled: 1974
Name of Drilling Company: LBNTZ
Casing Depth: 64
Casing Material: STEEL
Gallons Per Minute: 2562
Static Water level: _____
Spigot at the wellhead? N

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Please circle one or more as applicable:

Is the well water used for: ☒ (a) drinking
☒ (b) irrigation and/or gardening
☐ (c) live stock
☐ (d) other: WASHING, 67°

Please provide any additional comments you may have in the space below:

Please submit completed form to: US EPA
Attention:
Nuria Muñiz
USEPA REGION 5
77 West Jackson Boulevard
Mail Code: SR-6J
Chicago, IL 60604-3507

ACCESS AUTHORIZATION

I, [REDACTED]

First Name

Middle Initial

Last Name

am the (please check one):

☒ owner

☐ tenant

☐ authorized representative of the owner

of the property with the following address:

Address [REDACTED]

City

CHAMPION

State

MI

Zip Code

49814

(hereinafter "Property"), and as such I have the authority to sign this authorization.

I grant authorization to the United States Environmental Protection Agency (EPA), its officers, employees, contractors and other authorized representatives to enter the Property. The Property is currently owned by

First Name

ABOVE

Middle Initial

Last Name

This authorization allows EPA, its officers, employees, contractors and other authorized representatives to have access to the Property to conduct sampling and other related response activities. EPA's activities at the Property will include, but not be limited to, the following:

collecting well water sample

The consent for access and use granted herein will commence on October 2011 and will continue until EPA completes the potable well sampling activities.

These actions by EPA are undertaken pursuant to its response authority under Section 104(a) of the Comprehensive Environmental Response, Compensation and Liability Act (CERCLA or Superfund), 42 U.S.C. Section 9604(a).

This written permission is given by me voluntarily, on behalf of myself and all other co-owners of this property, with knowledge of my right to refuse and without threats or promises of any kind.

(Please check one): ☒ I grant access to my properties.

☐ I do not grant access to my properties

(Signature)

(Printed Name)

(Date)

(Daytime Phone Number)

(Title, if signing as authorized representative of owner)

(Mailing address including City, State, and Zip Code)

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR KNOWLEDGE

Property Owner Name (if different from above):

First Name

ABOVE

Middle Initial

Last Name

Owner Mailing Address (if different than the physical address of the Property):

Address

City

State

Zip Code

Do you currently live in the Property? (circle one) ☒ Y / ☐ N

If not, is anyone living at the Property? (circle one) ☐ Y / ☒ N

Property Owner Telephone Number (if different from access authorization): _____

If Owner is not living at the Property, please provide the following information regarding residents at the property:

Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages: _____

Do you have an e-mail address? Please indicate here: _____

1 email address Ex. 6

Is this house also connected to a municipal water supply line? (circle one) ☐ Y / ☒ N

Does the residence share the well with another residence (s)? (circle one) ☐ Y / ☒ N

If yes, provide the physical address of all residences:

Address1

Address2

Do you want to be present during sampling? (circle one)

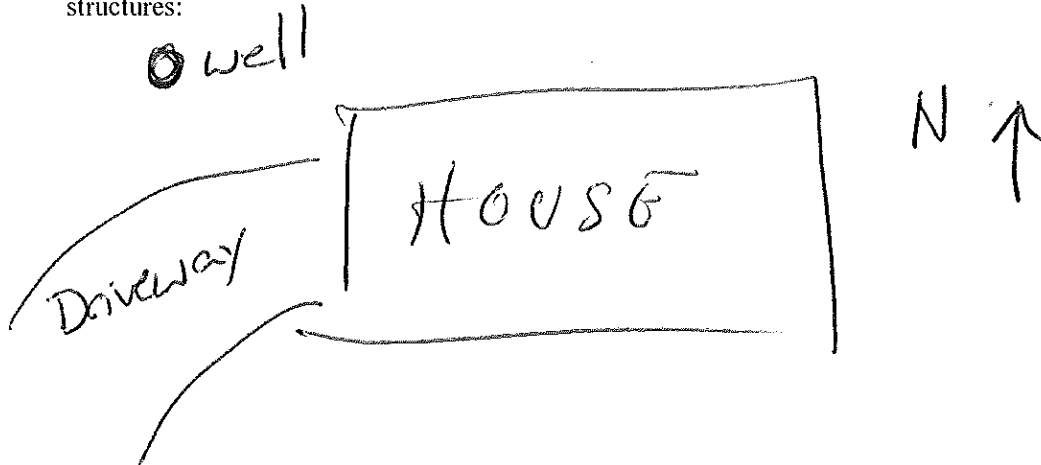
Y / N

DOESNT
MATTER

Has your well been sampled in the past by the County, State, or EPA? If yes, when? _____
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: Y
Total Depth of Well: 320-350
Date Drilled: 2001
Name of Drilling Company: KLEIMAN
Casing Depth: 320-350
Casing Material: STEEL
Gallons Per Minute: 5
Static Water level: _____
Spigot at the wellhead? NO

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Please circle one or more as applicable:

Is the well water used for ☒ (a) drinking
☒ (b) irrigation and/or gardening LITTLE
☒ (c) live stock
(d) other: WASHING / BATHING

Please provide any additional comments you may have in the space below:

Please submit completed form to: US EPA
Attention:
Nuria Muñiz
USEPA REGION 5
77 West Jackson Boulevard
Mail Code: SR-6J
Chicago, IL 60604-3507

ACCESS

I,

First Name

Middle Initial

Last Name

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☒ owner

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of the property with the following address:

Address

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Zip Code

49814

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(Please check one):

☒

I grant access to my properties.

☐

I do not grant access to my properties

(Signature)

(Date)

(Printed Name)

(Daytime Phone Number)

(Title, if signing as authorized representative of owner)

(Mailing address including City, State, and Zip Code)

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR KNOWLEDGE

Property Owner Name (if different from above):

First Name

Middle Initial

Last Name

ABOVE

Owner Mailing Address (if different than the physical address of the Property):

Address

City

State

Zip Code

Do you currently live in the Property? (circle one) Y / N

If not, is anyone living at the Property? (circle one) Y / N

Property Owner Telephone Number (if different from access authorization): _____

If Owner is not living at the Property, please provide the following information regarding residents at the property:

Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages: _____

Do you have an e-mail address? Please indicate here: _____

1 email address Ex. 6

Is this house also connected to a municipal water supply line? (circle one) Y / N

Does the residence share the well with another residence (s)? (circle one) Y / N

If yes, provide the physical address of all residences:

Address1

Address2

Do you want to be present during sampling? (circle one)

Y / N

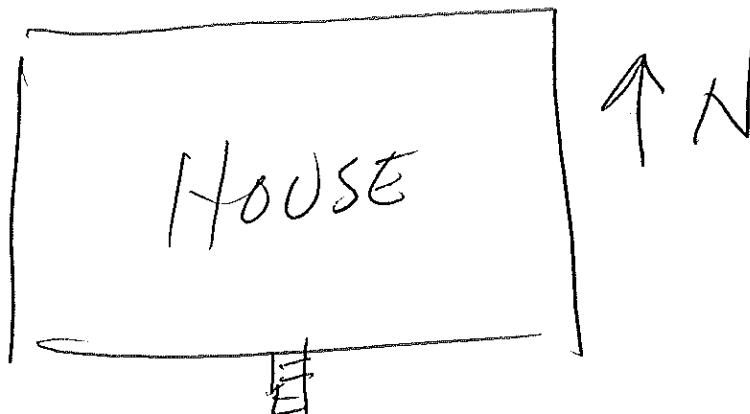
DOESNT
MATTER

Has your well been sampled in the past by the County, State, or EPA? If yes, when? _____

If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: Y
Total Depth of Well: 300
Date Drilled: 2000
Name of Drilling Company: KLGIMAN
Casing Depth: _____
Casing Material: STEEL
Gallons Per Minute: _____
Static Water level: 280
Spigot at the wellhead? Y

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Please circle one or more as applicable:

Is the well water used for ☒ (a) drinking

(b) irrigation and/or gardening

(c) live stock

(d) other: BATHING/WASHING

WELL

Please provide any additional comments you may have in the space below:

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Mail Code: SR-6J
Chicago, IL 60604-3507

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☒ owner

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City

State

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Middle Initial

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(Please check one): ☐ I grant access to my properties. ☐ I do not grant access to my properties

(Signature)

(Date)

(Printed Name)

(Daytime Phone Number)

(Title, if signing as authorized representative of owner)

4 names or address Ex. 6

(Mailing address including City, State, and Zip Code)

PLEASE ANSWER THE FOLLOWING QUESTIONS TO THE BEST OF YOUR KNOWLEDGE

Property Owner Name (if different from above):

First Name

Middle Initial

Last Name

Owner Mailing Address (if different than the physical address of the Property):

Address

City

State

Zip Code

Do you currently live in the Property? (circle one) ☒ Y ☐ N

If not, is anyone living at the Property? (circle one) Y / ☒ N

Property Owner Telephone Number (if different from access authorization)

1 phone no.Ex. 6

If Owner is not living at the Property, please provide the following information regarding residents at the property.

Name: _____

Phone: _____

Other contact information: _____

Number of residents and ages: _____

Do you have an e-mail address? Please indicate here: _____

Is this house also connected to a municipal water supply line? (circle one) Y / ☒ N

Does the residence share the well with another residence (s)? (circle one) Y ☒ N

If yes, provide the physical address of all residences:

Address1

Address2

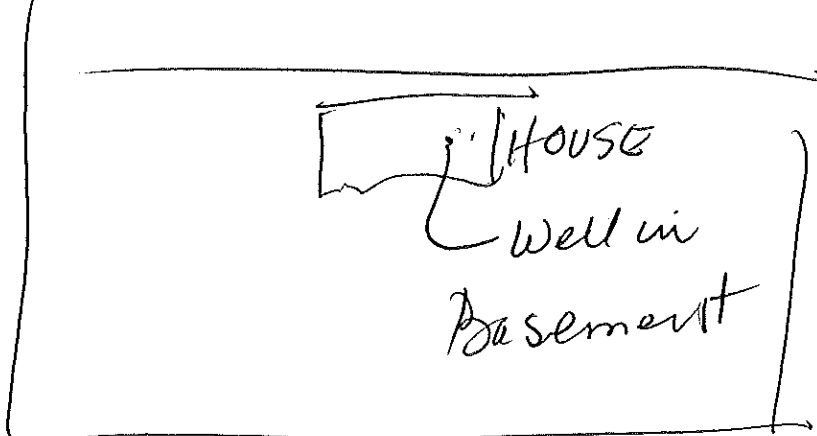
Do you want to be present during sampling? (circle one)

☒ Y ☐ N

Has your well been sampled in the past by the County, State, or EPA? If yes, when? No
If a water-supply well is located on your property, please provide the following information if known:

Active or Inactive: ✓
Total Depth of Well: 16
Date Drilled: 1978
Name of Drilling Company: _____
Casing Depth: _____
Casing Material: _____ ?
Gallons Per Minute: _____
Static Water level: _____
Spigot at the wellhead? ✓

Please provide a rough sketch below of where the well is located on your property relative to the house or other structures:



Please circle one or more as applicable:

Is the well water used for ☒ (a) drinking
☒ (b) irrigation and/or gardening
(c) live stock
(d) other: _____

Please provide any additional comments you may have in the space below:

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